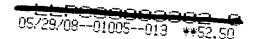
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(Requestor's Name)			
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2008 MAY 29 PM 1: 19 SECRETARY OF STATE FALLAHASSEF, FINDER,

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T. CLINE
WAY 8 0 2008
EXAMINER

## **COVER LETTER**

TO: Registration			
Division of C	Corporations		
SUBJECT: (Na	MACA ame of Florida Limited Par	ROS, LLLP rtnership or Limited Liability Limited Partnership)	
The enclosed Certification	icate of Amendment ar	and fee(s) are submitted for filing.	
Please return all cor	respondence concernir	ng this matter to:	
JONATI	HAN FEUERNAI (Contact Person)	N, ESQ.	
THER	(Firm/Company)	P.A	
1 S.I	(Firm/Company)  E. 3 <sup>rd</sup> AVENUE  (Address)	SUITE 2950	
MIA	(City, State and Zip Code)	<u> </u>	
For further informat	ion concerning this ma	atter, please call:  _at ( <u>305</u> ) <u>311 - 5758 AT 29</u> (Area Code and Daytime Telephone Number)	
JONATHAN F	EUERNAN	_at( <u>305</u> ) 311 - 5758 👼	*
(Name of Cont	tact Person)	(Area Code and Daytime Telephone Number)	T L. SANG
Enclosed is a check	for the following amor	· 'Ca	/7
\$52.50 Filing Fee	☐\$61.25 Filing Fee and Certificate of Status	□\$105.00 Filing Fee □\$113.75 Filing Fee, and Certified Copy Certified Copy, and Certificate of Status	, <u>, , , , , , , , , , , , , , , , , , </u>
STREET ADDRES	SS:	MAILING ADDRESS:	
Registration Section	1	Registration Section	
Division of Corpora	tions	Division of Corporations	
Clifton Building		P. O. Box 6327	
2661 Executive Cen		Tallahassee, FL 32314	
Tallahassee, FL 323	301		

## CERTIFICATE OF AMENDMENT . TO CERTIFICATE OF LIMITED PARTNERSHIP OF

	OF
MACRO	SILLP
(Insert name currently on file	s with Florida Department of State)
Pursuant to the provisions of section 620.1202, Flo limited liability limited partnership, whose certificated partnership, assigned Floriadopts the following certificate of amendment to it	ate was filed with the Florida Department of State on
This amendment is submitted to amend the following:	•
A. If amending name, enter the new name of the lin	nited partnership or limited liability limited partnership
N/A	
New name must be distinguishal	ble and contain an acceptable suffix.)
Acceptable Limited Partnership suffixes: Limited Partnership Acceptable Limited Liability Limited Partnership suffixes: Li	
B. If amending mailing address and/or principal principal office address here:	al office address, enter new mailing address and/or
New Principal Office Address: (Must be STREET address)	N/A PARTIES
New Mailing Address: (May be post office box)	F.F. STATE
C. If amending the registered agent and/or register new registered agent and/or the new registered office	red office address on our records, enter the name of the address here:
Name of New Registered Agent:	N/A
New Registered Office Address:	(Enter Florida street address)
(	, Florida
	(City), Florida (Zip Code)

## New Registered Agent's Signature, if changing Registered Agent:

I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent.

(If Changing Registered Agent, Signature of New Registered Agent)

D. If amending the general partner(s), enter the name and business address of each general partner being added or removed from our records:

GP Lisette G. Nunez 3501 Durango Street Coral Gables, FL 33134	Add Remove
GP MGP-LLL, Inc. 3501 Durango Street Coral Gables FL 33134	2008 HAY 29 PH 1: 19  See AHA See FLOAR COMPANY STANCE FLOAR COMPANY STA
	☐ Add ☐ Remove
	☐ Add ☐ Remove

E. If the limited partnership or limited liability limited partnership is amending its "limited liability limited partnership" status, enter change here:

- This Limited Partnership hereby elects to be a "Limited Liability Limited Partnership."
- This Limited Partnership hereby removes its "Limited Liability Limited Partnership" status.

(NOTE: If adding or removing" limited liability limited partnership" status, all general partners must sign this amendment.)

AL /A	
N / K	
Effective date, if other than the date of filing:	
(Effective date cannot be prior to nor more than 90 days after the State.)	date this document is filed by the Florida Department of
,	
Signature(s) of a general partner or all general part	ners*:
(*NOTE: Only one current general partner is required to sign this removing a "limited liability limited partnership" election statement	
when adding or removing a "limited liability limited partnership"	
	S II MA
<u>Lisette G. Nunez, General</u> Partner of Macros, LLLP	full Min
of Macros, LLLP	
	ARE TAY
	29 SSE
	OF PH
Signature(s) of all new or dissociating general parts	per(s), if any:
Signature(s) of air new or dissociating general parti-	D <sub>A</sub>
MGP-LLL, INC.	Kun Mix
Lisette G. Nunez, officer/director/	
Lisette o. Nunez, ortica/airectorij	
Eiling Foot	
Filing Fee: \$52.50 Certified Copy (optional): \$52.50	
Certificate of Status (optional): \$8.75	